



Trip leader's name _____

Name of trip conducted/group attending

Number of students expected to attend _____

Number/names of chaperones

Dates of trip _____

Date on which VersaTrans request was entered _____

I hereby acknowledge receipt and review of the Overnight Field Trip Handbook, and to the best of my ability, and the ability of the chaperone team, will adhere to the protocols referenced in the document, particularly the following:

- Informing chaperones of their responsibilities, and maintaining their observance of same;
- Informing students of their responsibilities for behavior prior to and during the trip;
- Maintenance of all necessary medical records on the trip;
- Paying attention to and informing everyone regarding the specifics of emergency procedures at any hotel(s) or other locations utilized during the trip upon arrival;
- Communicating with parents during the course of the trip, depending upon length.

Signature of trip leader

Date

Division head signature